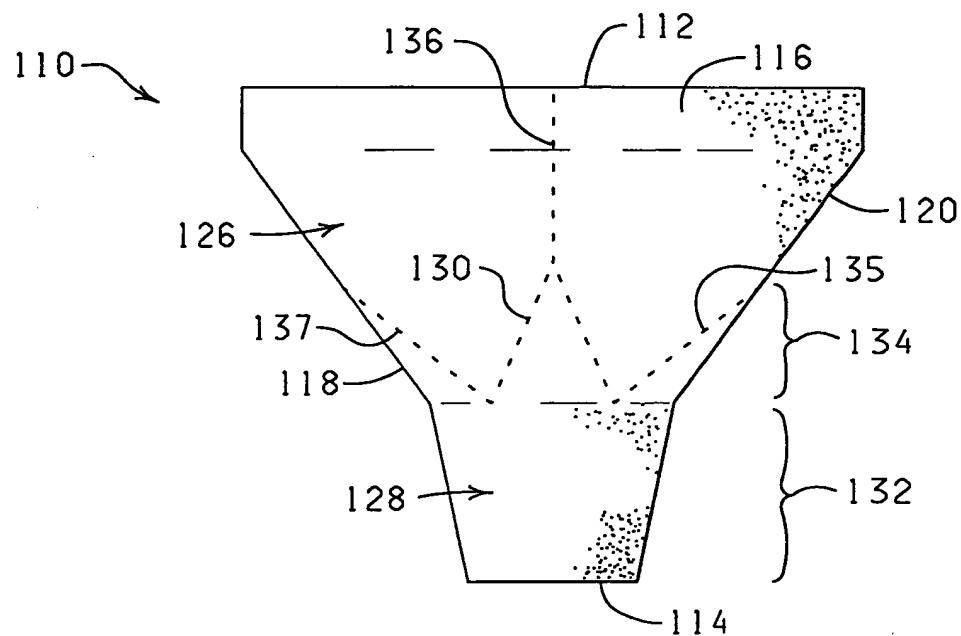


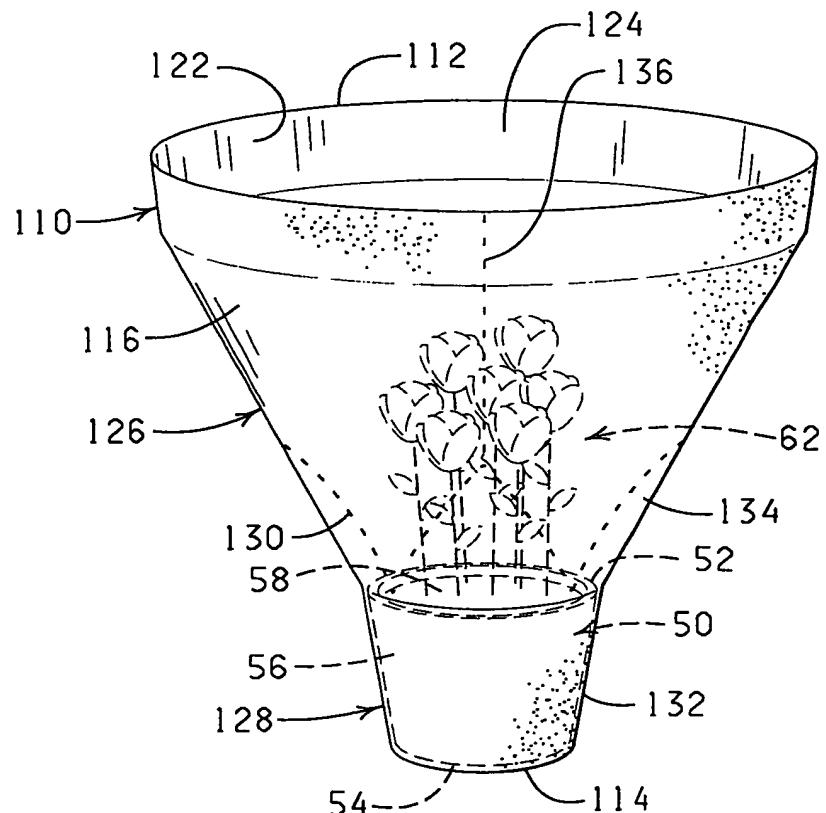
**EXHIBIT "G"**

SHEET 7 OF 8

REPLACEMENT DRAWINGS



H-H. 14

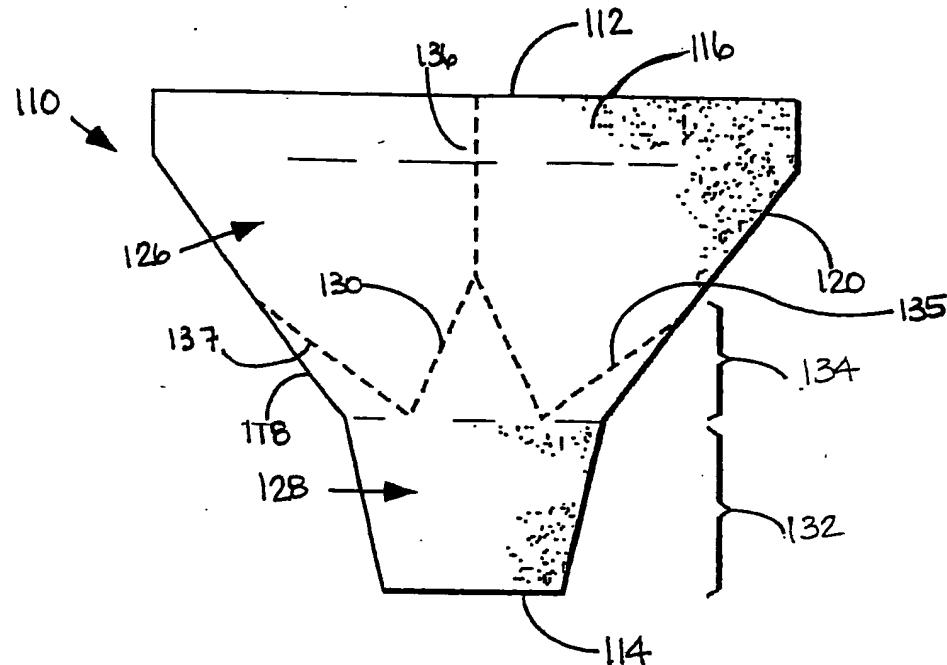


H-H. 15

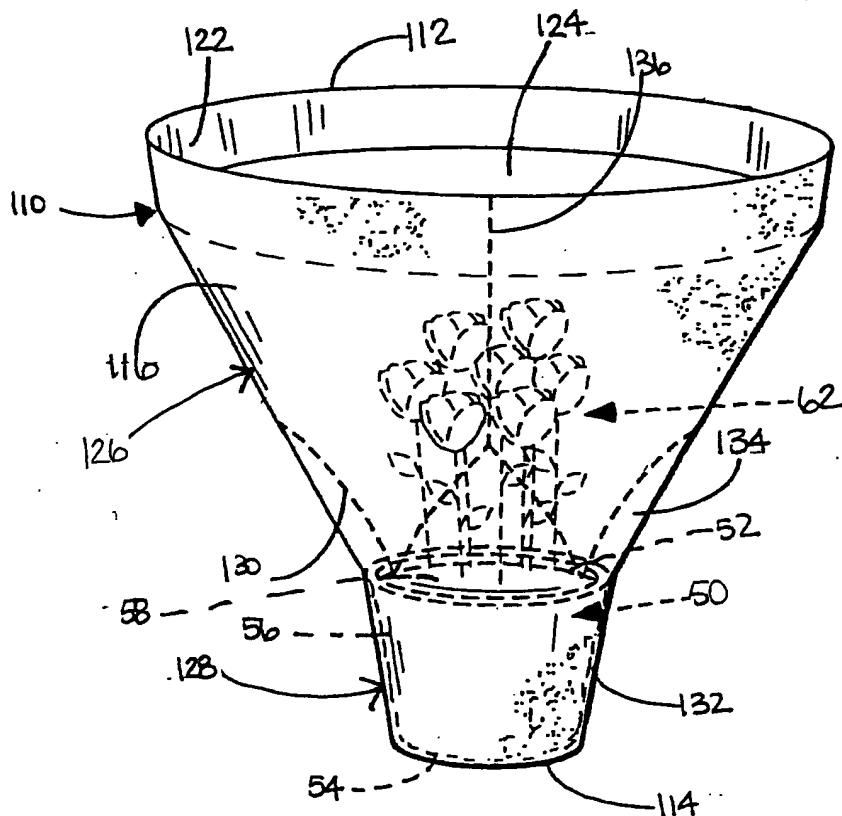
EXpress MAIL NO.: EV368015514US DATE DEPOSITED: 05/26/2005  
Serial No.: 7195,030  
Title: WR. FOR FLORAL GROUPING FORMED OF CLOTH AND POLYMER ILM  
Inventor: Donald E. Weder Group: 3644  
Filed: 07-09-2002  
Agent: Kathryn L. Hester, Ph.D.  
Docket No. 8403.631 Examiner: F. Palo

**EXHIBIT "H"**

SHEET 7 OF 8 INFORMAL DRAWINGS FROM PARENT 10/195,030



**FIG. 14**



**FIG. 15**

## EXHIBIT "I"

Customer Copy  
Label 11-F June 2002



EV 368015514 US



UNITED STATES POSTAL SERVICE®

Post Office To Addressee

<b>ORIGINATOR (POSTAL USE ONLY)</b>		
PO Box Code <i>3149</i>	Day of Delivery <input type="checkbox"/> Next <input type="checkbox"/> Second <input type="checkbox"/>	Flat Rate Envelope <input type="checkbox"/>
Date <i>5/26/05</i>	Time In <i>4:45</i>	Postage <i>\$ 13.65</i>
Time In <i>4:45</i>	<input type="checkbox"/> 12 Noon <input type="checkbox"/> 3 PM	Return Receipt Fee
AM <input type="checkbox"/> PM	<input type="checkbox"/> 2nd Day <input type="checkbox"/> 3rd Day	
Weight <i>7.40 ozs.</i>	Int'l Alpha Country Code	COD Fee    Insurance Fee
No Delivery <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday	Acceptance Clerk Initials <i>JL</i>	Total Postage & Fees <i>\$ 13.65</i>

**CUSTOMER USE ONLY****METHOD OF PAYMENT:**Express Mail Corporate Acct. No. *368015514*

Delivery Attempt Mo. Day	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
Delivery Attempt Mo. Day	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
Delivery Date Mo. Day	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
<input type="checkbox"/> WAIVER OF SIGNATURE (Domestic Only) Additional merchandise insurance is valid if no waiver of signature is requested. I wish delivery to be made without obtaining signature of addressee or addressee's agent (if delivery employee judges that article can be left in secure location) and I authorize that delivery employee's signature constitutes valid proof of delivery.		
<input type="checkbox"/> NO DELIVERY <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday		Customer Signature <i>[Signature]</i>

Federal Agency Acct. No. or  
Postal Service Acct. No.**FROM: (PLEASE PRINT)**PHONE *(840) 394-5500*

DURGAF CLOTHING & ACCESSORIES  
1631 NW EXPRESSWAY ST STE 1000  
OKLAHOMA CITY OK 73113-1450

KLH/kbl 5-26-05 84039408  
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Mail Stop FEE AMENDMENT  
COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, VA 22313-1450

PATENT

Application No. : 10/647,247 Confirmation No.: 3184  
 Applicant : Donald E. Weder  
 Filed : 09/29/2003  
 TC/Au : 3644  
 Examiner : F. Palo  
 Title : WRAPPER FOR FLORAL GROUPING FORMED OF CLOTH AND POLYMERIC FILM  
 Docket No. : 8403.968  
 Customer No. : 30589  
 Express Mail No. : EV368015514US Deposited On: 05/26/2005

Sir: Please acknowledge receipt of the following by stamping this card with the date received and returning it to me.

1. Transmittal Form (1 page);
2. Extension of Time - 3 months (1 page);
3. Fee Determination Record (1 page);
4. Credit Card Payment Form (1 page);
5. Amendment and Response (28 pages);
6. Copy of Informal Figs. 14 & 15 from parent 10/195,030 (1 sheet);
7. Formal Figs of 14 & 15 of subject application (1 sheet);
8. Pre-addressed postcard.

Commissioner is authorized to charge to credit card (Credit Card Payment Form attached) the following:  
\$1,020.00 for extension of time - 3 months

Kathryn L. Hester, Reg. No. 46,768  
05/26/2005 (KLH/kbl)

